Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate	level produced by rate revision effective	3/15/2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
 Automobile Physical Damage Private Passenger Commercial 	·	
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		***
7. Surety		
8. Boiler and Machinery		
9. Fire	\$0.	0%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory which meet the guidelines for the Large	(territories) or certain classes? If so, specify Premium Discount Plan.	: Applies to all classes and territories
Brief description of filing. (If filing follows our Large Premium Discount Plan.	s rates of an advisory organization, specify o	
*Adjusted to reflect all prior rate change		
**Change in Company's premium level	which will result from application of new rate	S.
	The Cinci	nnati Indemnity Company
	THO OHO	Name of Company
		•
	Connic	e Petertonjes - Analyst
	· · · · · · · ·	Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

OCT - 3 2005

SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		3/15/2006	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial			
2. Automobile Physical Damage Private Passenger Commercial			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire	\$26,854,576	-1.40%	
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other			
Line of Insurance			
Dan Clina ank annie to antoin torritore	(territories) or certain classes? If so, specify	v. Applies to all classes and territories	
which meet the guidelines for the Large	Promium Discount Plan	y. Applies to all elasses and territories	
	rates of an advisory organization, specify o	organization): Amending the factors for	
*Adjusted to reflect all prior rate change	S	_	
**Change in Company's premium level v	which will result from application of new rate	2 S.	
	The Cine	inneti Ingurence Company	
	Ine Cinc	innati Insurance Company Name of Company	
		Hamo Of Company	
	Conn	ie Petertonies - <u>Analyst</u>	
		Official – Title	

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

OCT - 3 2005

SPRINGFIELD, ILLINOIS

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate level produced by rate revision effective _		3/15/2006	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.		/	
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
	Surety		
	Boiler and Machinery	7	
9.	Fire	\$0.	0%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	es filing only apply to certain territory (ich meet the guidelines for the Large F	territories) or certain classes? If so, spec Premium Discount Plan.	sify: Applies to all classes and territories
	ef description of filing. (If filing follows Large Premium Discount Plan.	rates of an advisory organization, specify	organization): Amending the factors for
	djusted to reflect all prior rate changes change in Company's premium level w	hich will result from application of new ra	tes.
	/	The Ci	ncinnati Casualty Company
		THE OI	Name of Company
	/	Con	nie Petertonies - Analyst
			Official – Title
	/		

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	vel produced by rate revision effective	September 15, 2005
(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ <u>or -)</u> **
<u></u>		
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire dwelling	33,360	
10. Extended Coverage	22,240	-4.0
11. Inland Marine		
12. Homeowners		· · · · · · · · · · · · · · · · · · ·
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	*	
Line of Insurance		
Brief description of filing. (If filing follows	territories) or certain classes? If so, specify: s rates of an advisory organization, specify w for the adjusted expected permissable.	organization): The changes will help
	VO TOTAL	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level with	hich will result from application of new rates	i.
	GILLO	. Insurance Company
		Name of Company
	Jayme Law	rence, Compliance Analyst
		Official - Title
DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPRING PAUG ? 3 2005	L	
1		
SPRINGFIELD, ILLINOIS	s	

(1) <u>Coverage</u> 1. Automobile Liability	(2)	
	Annual Premium	(3) Percent
1. Automobile Liability	Volume (Illinois)*	<u>Change (+ or -)**</u>
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$110,002	-0.7%
0. Extended Coverage	W110,002	-0.770
1. Inland Marine		
2. Homeowners		-
3. Commercial Multi-Peril		
4. Crop Hail 5. Other		
Line of Insurance		
Brief description of filing (If filing follo	use rates of an advisory promination of	if.,
With this filing it is our Intent to submit the following rate		,
With this filing it is our intent to submit the following rate 0.7%.	e revisions to apply to our Commercial Property Progra	,
With this filing it is our intent to submit the following rate 0.7%. Adopted the above captioned previously de	e revisions to apply to our Commercial Property Progra	m. These changes will result in an overall impact of -
With this filing it is our intent to submit the following rate 0.7%. ➤ Adopted the above captioned previously do ➤ Amend the policy minimum premium for bo	e revisions to apply to our Commercial Property Progra eferred ISO Circulars oth prepaid policies and annual premium payment plans	m. These changes will result in an overall impact of -
With this filing it is our intent to submit the following rate 0.7%. Adopted the above captioned previously do Amend the policy minimum premium for bo Amend minimum premium to \$100 for earth	e revisions to apply to our Commercial Property Program eferred ISO Circulars oth prepaid policies and annual premium payment plans hquake.	m. These changes will result in an overall impact of - s to \$450 DIVISION OF INSURANCE
With this filing it is our intent to submit the following rate 0.7%. ➤ Adopted the above captioned previously do ➤ Amend the policy minimum premium for bo	e revisions to apply to our Commercial Property Prograte ferred ISO Circulars of prepaid policies and annual premium payment plans hquake.	m. These changes will result in an overall impact of - s to \$450 DIVISION OF INSURANCE
With this filing it is our Intent to submit the following rate 0.7%. Adopted the above captioned previously do Amend the policy minimum premium for bo Amend minimum premium to \$100 for earth Attached please find the revised manual pages for your Attached: (IL) CF-HE-1, Fourth Reprint, February 200	e revisions to apply to our Commercial Property Prograte ferred ISO Circulars of prepaid policies and annual premium payment plans hquake.	m. These changes will result in an overall impact of - s to \$50 DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR OCT - 3 2005
 Adopted the above captioned previously do Amend the policy minimum premium for both Amend minimum premium to \$100 for earth Attached please find the revised manual pages for your 	e revisions to apply to our Commercial Property Program eferred ISO Circulars oth prepaid policies and annual premium payment plans hquake.	m. These changes will result in an overall impact of - s to \$50 DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR OCT - 3 2005
With this filing it is our intent to submit the following rate 0.7%. Adopted the above captioned previously do Amend the policy minimum premium for bo Amend minimum premium to \$100 for earth Attached please find the revised manual pages for your Attached: (IL) CF-HE-1, Fourth Reprint, February 200 Withdrawn: (IL) CF-HE-1, Third Reprint, May 2005	e revisions to apply to our Commercial Property Program eferred ISO Circulars oth prepaid policies and annual premium payment plans hquake. The review and consideration.	These changes will result in an overall impact of the state of insurance of insuran

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Сһалде	in Company's premium or rate level	produced by rate revision effective	NB & RNLS Effective 2-1-06
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
•	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$1,395,701	+2.4%
10.	Extended Coverage		. 2,170
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
With th +2.4%	nis filing it is our intent to submit the following rate re	evisions to apply to our Commercial Property Program.	This change will result in an overall impact of
	 Adopted the above previously deferred ISO fi 	lings	
	 Increased minimum premium for both prepaid 	policies and annual premium payment plans to \$350	
	 Increase minimum premium for Earthquake C 	Coverage to \$150	
;	 Amend Rule 38. 3. Premium Determination to 	show a charge \$50 for the Garage Amendatory Endon	sement.
;		e Options 3. Premium Determination to amend the p	premium chames for Business Income and Extra
Attache	ed please find the revised manual pages for your re	view and consideration.	DIVISION OF INSURANCE
	ched: (IL) CF-HE-3, Third Reprint, February 2006 (IL) CF-HE-4 and (IL) CF-HE-5, Fourth Reprir		OCT - 3 2005
Withdra	awn: (IL) CR-HE-3, Second Reprint, May 2005 (IL) CF-HE-4 and (IL) CF-HE-5, Third Reprint,	May 2005	
Rule o	f Application: These changes shall be applicable	e to all policies effective on and after February 1, 20	06. SPRINGFIELD, ILLINOIS
		e letter may be used as an approval notice for our file.	
		<u>Harleysvi</u>	ille Lake States Insurance Company Name of Company Sherry Walter
			State Filing Analyst
			Official - Title